

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L21000136874

**Entity Name:** BLOSSOM USA LLC

**Current Principal Place of Business:**

2100 PONCE DE LEON BLVD  
STE 850  
CORAL GABLES, FL 33134

**Current Mailing Address:**

PMB# 502 14422 SHORESIDE WAY, SUITE 110  
STE 850  
WINTER GARDEN, FL 34787 US

**FEI Number:** 86-3196824

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

AVALON INCORPORATORS LLC  
2100 PONCE DE LEON BLVD  
STE 850  
CORAL GABLES, FL 33134 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name AVALON UNITED LLC  
Address 3411 SILVERSIDE ROAD  
TATNALL BUILDING 104  
City-State-Zip: WILMINGTON DE 19810

Title CORPORATE SECRETARY;  
AUTHORIZED SIGNER  
Name TORO, CYNTHIA  
Address 2020 PONCE DE LEON BLVD., SUITE  
904  
City-State-Zip: CORAL GABLES FL 33134

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AVALON UNITED LLC

**MANAGER BY SARAY  
DJIDJI, ATTORNEY IN  
FACT**

**05/12/2023**

